

### WHAT'S NEW SINCE OUR LAST NEWSLETTER?

#### The Power of One!

Daniel Ryan, a consumer advocate from Wellington, New Zealand (NZ), works as a senior software developer. He is a co-founder and president of <u>Making Sense</u> of <u>Fluoride</u>, a committee member of <u>NZ Skeptics</u> and a co-founder and committee member of the <u>Society for Science Based Healthcare</u>.

Daniel, the 2015 NZ 'Skeptic of the Year', spends his free time carrying out sceptical activism by helping organise the fortnightly <u>Science-based Healthcare Activism 'Meet up' group</u> at a pub. This group tackles inaccuracies in advertising in government notices, announcements and policies and in the media and makes complaints to various organisations including <u>Medsafe</u>, <u>Commerce Commission</u> and the Advertising Standards Authority (ASA),



Daniel Ryan

More than 30 complaints submitted by Daniel for a range of bogus health interventions, including acupuncture, healing coloured lights and pointy healing mats, have been upheld.



In NZ, acupuncture is eligible for <u>Accident Compensation Corporation (ACC)</u> payments for the treatment of personal injuries. It is also widely promoted for the prevention and treatment of cancer, diabetes, thrombosis and heart disease.

Concerned that the ASA had stopped processing complaints against acupuncture, Daniel set out to study the claims on acupuncture websites. Daniel's study, "Acupuncture, ACC and the Medicines Act" was published in the New Zealand Medical Journal. It exposed the surprising extent of misleading medical claims made on more than a hundred New Zealand-based acupuncture websites. The study received a number of positive reviews from the medical community.

You may find Daniel's countering anti-fluoride misinformation in New Zealand, including Anti-fluoride group air controversial TV ads, Thames (NZ) says yes to keeping fluoride in water and Anti-fluoride DHB candidates are standing up and down country, but not always revealing their stance.



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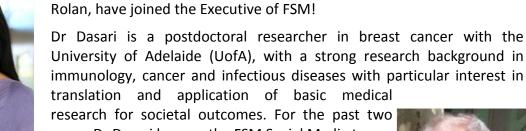
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### **FSM EXECUTIVE NEWS**

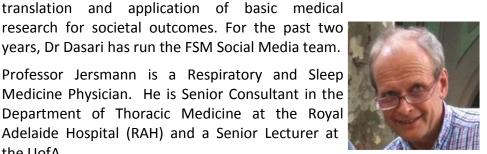
Rolan, have joined the Executive of FSM!



Dr Pallave Dasari



Professor Jersmann is a Respiratory and Sleep Medicine Physician. He is Senior Consultant in the Department of Thoracic Medicine at the Royal Adelaide Hospital (RAH) and a Senior Lecturer at the UofA.



Prof Hubertus Jersmann



Prof Paul Rolan

Paul Rolan was Professor of Clinical Pharmacology at the University of Adelaide and Senior Consultant Physician at the Pain Management Unit of the Royal Adelaide Hospital. He is currently Director of Innovation in the Faculty of Health Sciences at the University of Adelaide. He continues to research new treatment for pain.

Dr Pallave Dasari, Professor Hubertus Jersmann and Professor Paul

Dr Dasari is a postdoctoral researcher in breast cancer with the

immunology, cancer and infectious diseases with particular interest in

### Therapeutic Goods Amendment Bill – Public Hearing

On 24 January 2018, a public hearing supported by a network of civil society organisations, including FSM, Monash University, the Foundation for Effective Markets and Governance, the School of Regulation and Global Governance (ANU) and CHOICE, was held at ANU.

The Therapeutic Goods Amendment Bill, under review by a Senate Committee, was discussed. Arguing that the bill was 'non-controversial', the Government was trying to bypass the Committee.



#### The Bill:

- removes pre-approval of advertisements in favour of self-regulation;
- suggests, without ensuring ongoing stakeholder input and transparency of complaint outcomes, that the TGA handle advertising complaints; and
- \* endorses an industry-submitted list of 'permissible indications' for complementary medicines.

The compromise amendment of 2 February will extend the pre-approval system for two years, reviewable after 18 months. The Government ignored concerns that the TGA's new advertising system is unlikely to get up in time nor perform as suggested; for example, actioning important complaints within 10 days and high and medium impact cases within 20 to 40.

There was no action on 'traditional' indications such as, 'Disinhibit Water', 'Unblock/open/ relax channels', 'Replenish Essence', and 'Subdue Yang', nor on the need for these to be accompanied by an advisory or disclaimer.



### COMPLEMENTARY AND ALTERNATIVE MEDICINE

### Frank Van der Kooy 's Blog



The view of a previous insider! Analytical Chemist, Dr Van der Kooy, exposes pseudo-academia and vested interests.

"Is the Chinese Communist party currently exerting an influence on the Australian healthcare system? If so, how did they manage to get a foot in the door? Let's have a look!" China Power and Influence! Part 1: TCM and the Aussie Academics who sold their souls!

### **Homeopathy**



Thieme

Thieme Medical, a German medical and science publisher in the Thieme Publishing Group, produces professional journals, textbooks, atlases, monographs and reference books in both German and English. These cover a variety of specialties. The list also includes homeopathic journals.

FSM has written to Daniel Schiff, Senior Vice President, Thieme Medical Publishers.

### **Acupuncture and Traditional Chinese Medicine (TCM)**

Professor Edzard Ernst, the world's first Professor of Complementary Medicine, has commented:

"I have been studying acupuncture for the last 25 years and published probably more peer-reviewed papers on the subject than most researchers in this area - currently 192 Medline-listed articles. My interpretation of the often somewhat confusing evidence is that there is not a single condition for which acupuncture is convincingly effective. I have also not seen any convincing evidence for any Traditional Chinese Medicine (TCM) remedies".





Cochrane FSM supports Professor Ernst's scientific conclusions about acupuncture and TCM, as do nearly 100 systematic reviews, published in PubMed and in the Cochrane Library.

### **Royal Australian College of General Practitioners**



Health and Clinical Excellence

According to the 'Guideline for the management of knee and hip osteoarthritis Consultation draft - November 2017', acupuncture for people with knee and/or hip OA "is not recommended as there are only small benefits and multiple visits can be expensive".

This follows the 2016, UK National Institute for Clinical Excellence (NICE) guideline [NG59] "On Low back pain and sciatica in over 16s: assessment and management" which recommends that health practitioners "do not offer acupuncture for managing non-specific low back pain with or without sciatica".



### **Royal Australian College of Physicians**

FSM wrote to the President, Royal Australian College of Physicians (RACP), asking for help with a complaint to AHPRA about non-evidence based claims by Traditional Chinese Medicine practitioners.

In particular, we cited online claims about the diagnostic accuracy of 'tongue and pulse diagnosis' for a wide variety of medical conditions and for the purpose of selling patients unproven Chinese herbal medicines and interventions. These diagnostic techniques are not classified as pathology tests, but rather are clinical surmise without quality data to support their veracity.

While FSM acknowledges that some information can be derived from pulse irregularities and visible oral pathology, these 'tongue and pulse' diagnostic claims go way beyond the maximum potential of these observations to detect organic disease.

The dangers are not just from delaying accurate diagnosis and proven treatments, but from wrong diagnosis, treatment with inappropriate and sometimes adulterated Chinese herbal medicines and from exploitation of the public who are unaware how little regulation of these therapies in Australia exists. One protection is that claims, unsupported with quality evidence (as opposed to traditional anecdote), should not now be made publicly. AHPRA can try to stop practitioners from advertising such claims.

# S'T'OP Misleading Claims

### **Australian Acupuncture and Chinese Medicine Association**

A recently published review on acupuncture, which could not pass the peer-review process of any serious journal and the requirements of the Chinese Medicine Board of Australia (CMBA) for truth in advertising, is being cited by the Australian Acupuncture and Chinese Medicine Association (AACMA) as 'evidence' that acupuncture works.

The report titled <u>"The Acupuncture Evidence Project: A Comparative Literature Review"</u> has been reviewed by Professor Edzard Ernst, a world authority on complementary and alternative medicine. Ernst's review is titled <u>"A new, comprehensive review of acupuncture turns out to be an orgy in wishful thinking"</u>.

He highlights the following problems:

- \* the review has not been peer-reviewed;
- \* the review would be rejected by reputable journals;
- the range of 'experts' referred to does not include any experts in evidence-based medicine (EBM);
- \* the 'experts' are not critical of acupuncture nor of the many claims for it, and
- \* the 'experts' earn their livelihoods through acupuncture this was not declared as a conflict of interest.



Ernst also points out that most of the evidence included in the review originated from China, where acupuncture research with negative results is not published.

FSM <u>wrote to the Chair and Liaison Officer, AACMA</u> reminding him of the CMBA's <u>July newsletter</u>, relating to 'acceptable advertising" and asking them to remove the link. The AACMA rejected Professor Ernst's review, and made unsubstantiated statements about him. In an open letter, he has asked them to <u>"produce the evidence, or fully retract them".</u>



#### Women's Health and Research Institute of Australia

FSM <u>wrote to the Women's Health and Research Institute of Australia (WHIRA)</u> about the claims made on their website for 'Acupuncture and Herbal Medicine'. These are in breach of the July 2017 Chinese Medicine Board of Australia (CMBA) newsletter.

The WHIRA link claimed, "Acupuncture and herbal medicine have helped manage a wide variety of conditions including pelvic pain, dysmenorrhoea, polycystic ovarian syndrome (PCOS), peripheral neuropathies such as pudendal neuralgia, headaches and lower back pain" and lists a wide range of illnesses under the following headings:

- \* pain management
- \* musculo-skeletal disorders
- upper respiratory tract disorders
- gastrointestinal disorders

FSM asked them to remove any claims for the efficacy of acupuncture and Traditional Chinese medicine and to notify their members when they did so. In her response, CEO, Samantha Sutherland, acknowledged our concerns regarding the acupuncture and Chinese medicine claims and temporarily removed the link. She stated that they would update their website "to reflect the CMBA advertising guidelines".

However, the WHIRA continues to include <u>an acupuncturist</u> on their team.

#### **Virtual Medical Centre**

With no robust evidence to support any of claims for acupuncture, FSM wrote to the Virtual Medical Centre (VMC) asking them to remove the 'medical acupuncture' link, as it was providing incorrect information to vulnerable patients and was breaching the CMBA July guidelines on 'acceptable evidence'.

The VMC link listed the following range of illnesses that it claims were "recommended for acupuncture by the World Health Organization":

- \* respiratory: acute sinusitis, acute rhinitis, acute tonsillitis, common cold
- bronchopulmonary: acute bronchitis, asthma
- \* eye: acute conjunctivitis, cataract without complications, myopia, central retinitis
- \* mouth: toothache, pain after tooth extraction, gingivitis, pharyngitis
- \* orthopaedic: periarthritis humeroscapularis, tennis elbow, sciatica, low back pain, rheumatoid arthritis
- gastrointestinal: oesophageal spasm, hiccoughs, gastroptosis, gastritis, gastric hyperacidity, chronic duodenal ulcer, ulcerative colitis, bacterial dysentery, constipation, diarrhoea, paralytic ileus
- neurological: headache, migraine, trigeminal neuralgia, facial paralysis, paralysis after apoplectic fit, peripheral neuropathy, paralysis caused by poliomyelitis, menieres syndrome, neurogenic bladder dysfunction, nocturnal enuresis, intercostal neuralgia".



FSM also identified additional articles which were out of date. VMC thanked FSM for drawing their attention to these articles, and removed them. They also stated that they would, as a priority, review all their archived news.



### **Australian Traditional Medicine Society**

FSM <u>wrote to Peter Berryman</u>, President, Australian Traditional Medicine Society (ATMS), to bring to his attention a number of claims for acupuncture on both the <u>'Natural Medicines Week'</u> and the <u>ATMS website</u>, because they are providing incorrect information to vulnerable patients.

In their July newsletter, the Chinese Medicine Board of Australia stated the following:

"acceptable evidence needs to be up to date. Recent complaints have identified that many Chinese medicine practitioners say in their advertising (including websites) that the claims they make are based on a statement previously published by the World Health Organisation (WHO) about conditions acupuncture can effectively treat";

"the Board is particularly concerned about claims that acupuncture is a safe and effective treatment for turning breech babies";

"acceptable evidence to support advertising claims needs to be based on findings obtained from quantitative methodology such as systematic reviews of randomised and high-quality controlled trials"; and

"registrants should be wary about using, in advertising words, such as 'safe and 'effective'".

The 'Natural Medicine Week', (21-17 May 2018), Traditional Chinese Medicine section claims "According to the World Health Organisation (WHO) acupuncture has been proven to be an effective treatment for hay fever, depression, facial pain, induction of labour, knee pain, lower back pain, nausea and vomiting, neck pain, rheumatoid arthritis and tennis elbow."



The ATMS website also displays an image that states that "The World Health Organization (WHO) recommends Acupuncture as an effective treatment for over forty medical problems".

FSM has received no response from the ATMS and they continue, despite the WHO's having removed this claim from its website, to refer to the WHO as 'evidence' for acupuncture.

### **Australian Pharmaceutical Industry Limited (API)**

FSM <u>wrote to Mr Richard Vincent</u>, CEO & Managing Director, Australian Pharmaceutical Industry Limited (API) about our **c**oncerns relating to the claims made on the API online 'Health A-Z: Acupuncture'.

The Priceline link (now removed) referred to a range of illnesses which it claims can be effectively treated by acupuncture, based on 'evidence' from the discredited (and removed) World Health Organization (WHO) report, stating that WHO "have recently recognised that these conditions have been successfully treated with acupuncture".

Under the title of 'Evidence' the Priceline 'Health A-Z: Acupuncture' link stated the following:

"Acupuncture has been shown to treat a wide range of health conditions such as:

- providing pain relief;
- \* improvement of skin conditions such as eczema and acne;
- management of premenstrual symptoms;
- improvement of digestive disorders such as constipation and diarrhoea;
- reduction of anxiety and stress, and
- improvement of neurological conditions such as headaches and migraines".

While we have received no response to our letter, the link has gone.



### **PRIVATE HEALTH INSURANCE**

### **Hospital Benefit Fund**

Following a newspaper quotation from, John Van Der Wielen, the Managing Director and Chief Executive Officer of HBF Health that his industry has "gone too far covering nonclinical therapies" and that he believed that "reforms must go further", FSM requested that he review the evidence himself and so withdraw insurance for acupuncture because it lacks an evidence base. We included a summary of Cochrane reviews which failed to report any robust evidence for acupuncture for any disease or disorder.



John Van Der Wielen

We received a response from Van Der Wielen that he was "very interested" in FSM and "would be very happy to meet and discuss the future of private health insurance and clinical evidence with your organisation". He also stated that "HBF is currently undertaking a thorough review of our product portfolio and the points you have made will be considered carefully as we determine the future form our health insurance products should take". The HBF review is due for completion "prior to the end of 2018 but I assure you the process is well underway".

#### Medibank

The Medibank 'Live Better' link was written by a Chinese Medicine practitioner, who claimed that Traditional Chinese Medicine "can improve your health and vitality", "treats conditions ranging from the common cold to autoimmune disease and chronic fatigue", "is a viable method of care for most health complaints", and that it "places as much emphasis on disease prevention as on treatment. This allows scope for the patient who comes in for a general check-up, looking to improve overall health and vitality".

FSM wrote to Medibank requesting that they remove the link because any claims on their website should be consistent with the Australian Health Practitioner Regulation Agency advertising guidelines. Medibank removed the article.

## COMPLEMENTARY AND ALTERNATIVE MEDICINE **OVERSEAS NEWS**

### **Canada: CBC News Investigation**

Following a 2017 investigation by CBC News, the Manitoba Chiropractors Association (MCA), the governing body for chiropractors in Manitoba, has started to crack down on the advertising claims made on their websites by its members. CBC news





The CBC I-Team investigation found examples of chiropractors making questionable health claims on their websites and social media, including suggestions that chiropractic treatments could be used to treat cancer, Alzheimer's disease, and autism. There were also statements discouraging people from getting vaccines or diagnostic tests such as CT scans, colonoscopies and mammograms.





In May 2017, the MCA published a statement making it clear that vaccination is not within the scope of chiropractic practice. The MCA also developed a December 2017 directive for chiropractors to guide their communications on topics outside their scope of practice.

#### **UK: National Health Service**

In July 2017, the National Health Service (NHS) announced their intention to ban General Practitioners from prescribing homeopathy and herbal medicine because they are a 'misuse of scarce funds' and have no 'robust evidence'. Considered a placebo, homeopathy, in the past 5 years, has cost the NHS at least



£578,000.



No Laws

In December 2017, the NHS finally gave the 'green light' to a ban on prescribing 18 'low value products'. This will save them £141million per annum. The low value products include fish oil, herbal remedies and homeopathy.

#### India: National Medical Commission Bill 2017

On 2 January 2018, the Indian Medical Association (IMA) called off its 12-hour countrywide shutdown of out-patient department (OPD) services at all private hospitals in the country after Health Minister Jagat Prakash Nadda agreed to send the National Medical Commission Bill 2017 to a select committee for review.



More than 300,000 private and public doctors in the country of 1.25 billion had cancelled all outpatient services, forcing the government to delay a planned vote on the controversial

All outpatients services cancelled

bill in parliament. The controversial bill, an attempt to plug the shortfall in rural doctors, included a provision for a bridging course which would have allowing alternative medicine practitioners - including homeopaths, naturopaths, ayurvedic and unani practitioners - to practise as medical doctors.

### **Ireland: the Irish Parliament**

Ireland has no law against advertising or promoting miracle cures; nothing to stop faith healers or unqualified specialists tagging their treatments with 'cancer killer' or 'cancer cure', or promoting 'cancer preventative' or 'cancer halting' diets. An estimated 30% of cancer patients take supplements and

herbs, some of which actually inhibit the effectiveness chemotherapy, which they don't disclose to their medical team. An estimated 50% of all cancer patients are on some sort of diet.

A new bill, referred to as the 'Fact Act', or the 'Anti-Quackery Bill', aiming to crackdown on 'bogus' cancer treatments and quack scams, is due to be brought forward at the beginning of February.





#### **China: State Administration of Traditional Chinese Medicine**

Traditional Chinese medicine (TCM) accounts for a third of sales in China's \$117bn pharmaceutical market, around \$40bn!

\$40Bn

Pharmaceutical

Market

\$117Bn

In November 2014, to tap into the \$170 billion global TCM market, Australia signed an \$18bn Free Trade Agreement with China where TCM was singled out for special attention and which could see Australia welcoming hundreds of practitioners from China, to be officially registered to practise here.

In February 2016, concerned about the decline in TCM in recent decades – with 80% of people relying on Western medical treatment – the China State Council released a <u>"Strategic Development Plan for Chinese Medicine (2016-2030)"</u> that seeks to spread knowledge of TCM into campuses and homes and also promote TCM abroad.

In the past three years, China has <u>established 26 overseas TCM centres</u>, most in countries along the <u>Silk Road Economic Belt and the 21st-century Maritime Silk Road</u>, (referred to as the "Belt and Road" countries). More are planned. China has also set up 25 TCM international cooperation bases in <u>"key provinces, municipalities and autonomous regions"</u>.

In July 2017, a new law, which aims to protect TCM, promising equal status for TCM and western medicine, came into effect.

Despite comments by Chinese parents such as "Poisoning yet another generation," and "Let's also start courses in fortune telling and palm reading", children as young as 12 are being taught how to administer acupuncture, with TCM added to the curriculum in Zhejiang province, 100,000 textbooks have been distributed, more are on the way, and there are plans to extend the program throughout the country.

It is seen as "a way to get Chinese medicine's scientific [sic] values and spirit into every household. Instilling a love of our country's traditional culture in primary and secondary school students will be good for the health of the whole society." Provisions also include encouraging hospitals to set up TCM centres, and a licensing system for practitioners.

TCM <u>"is often unscientific, unreliable, dangerous, a threat to endangered species and even fatal to humans in some cases"</u>. Despite no definitive evidence that any disease or disorder can be cured by TCM, <u>"it remains an officially sanctioned treatment"</u>.

### **USA: Food and Drugs Administration**

The Food and Drugs Administration (FDA) is proposing changes to homeopathy regulation.

The FDA is proposing <u>a risk-based approach</u>, targeting homeopathic products which they consider the greatest risk to the public.

The criteria include:

- products with reported safety concerns;
- products that contain or claim to contain ingredients associated with potentially significant safety concerns;
- products for routes of administration other than oral and topical;
- products intended to be used for the prevention or treatment of serious and/or life-threatening diseases and conditions;





- \* products for vulnerable populations, and
- products that do not meet standards of quality, strength or purity as required under the law.

They further state "given the concerns about the proliferation of potentially ineffective and harmful products labelled as homeopathic, the FDA will consider taking additional enforcement and/or regulatory actions, consistent with the current enforcement policies, which also align with the risk-based categories described in the draft guidance, in the interest of protecting the public".

While it is a move in the right direction, it does not go nearly far enough.

### **USA: Congress - Bipartisan alternative medicine caucus**

In a <u>press release</u>, Democratic Congressman Jared Polis and Republican Congressman Mike Coffman announced their intention to launch the Integrative Health and Wellness Caucus "citing successes of integrative health treatments".



Meanwhile, the National Center for Complementary and Integrative Health (NCCIH), has spent <u>roughly \$3 billion</u> since its inception, the vast majority of which was <u>wasted investigating nonsense</u> like "magnet therapy".

### **AUSTRALIAN HEALTH PRACTITIONER REGULATION AGENCY**

Cochrane reviews, bringing together the combined results of the world's best medical research studies, are the gold standard in evidence-based health care. Founded in 1993, Cochrane conducts systematic reviews of health-care interventions and diagnostic tests, publishing them in the <a href="Cochrane Library">Cochrane Library</a>. When Cochrane reviews report that there is no acceptable evidence to support a particular claim, FSM urges Australian Health Practitioner Regulation Agency (AHPRA) and all its Boards to demand that registrants respect the Cochrane conclusion.





### **Advertising Compliance Team**

<u>Pulse diagnosis and tongue diagnosis</u> are widely used in traditional Chinese medicine. They are based on imagination, not on anatomical and physiologic reality. Concerned that these interventions are widely used by CMBA registrants to diagnose patients, in December 2017, FSM submitted <u>over 150 complaints</u> about websites that promote them and the diseases and disorders they claim to treat.

Registrants are <u>falsely advertising "safe and effective"</u> acupuncture interventions for babies, children, patients with major illnesses, women's health (including IVF, pregnancy and turning breech babies), patients with pain and a wide range of other diseases and disorders. Other claims include "effective interventions for smoking cessation and weight loss".

The <u>Advertising Compliance Team</u>, formed mid 2017, has assessed a number of FSM's complaints and found the advertisements in breach of the National Law. Initial compliance letters have now been sent out, with some positive results.



#### **Chinese Medicine Board Australia**

Concerned that the Chinese Medicine Board of Australia (CMBA) continues to reject the findings of the many Cochrane reviews of acupuncture, in October 2017 FSM wrote to the Board, asking if it accepted that Cochrane reviews are "acceptable and up to date evidence". In his response, the Chair, CMBA stated "neither the Board nor myself as Chair of the Board has rejected findings of the Cochrane reviews of acupuncture".



However, in December, 2017, the CMBA cited two examples of acceptable claims for the efficacy of Chinese medicine. Titled "Check your advertising: Chinese medicine examples", this publication cited two examples of established (presumably evidence-based) roles for Chinese medicine:

"to manage the symptoms of specific conditions (e.g. pain management related to certain conditions)", and

"in supporting the effectiveness of treatments (e.g. IVF)".

However, neither claim is supported by Cochrane. They are therefore not associated with the Board's stated requirements for "acceptable evidence".



Robert Norman AO is a Professor of reproductive and periconceptual medicine at the Robinson Research Institute, University of Adelaide. He has practised in reproductive medicine for 3 decades and has participated in or introduced all of the great breakthroughs in fertility and IVF (In Vitro Fertilisation) from the mid 1980's. He is considered Australia's leading IVF expert. According to Professor Norman, "The latest randomized clinical trials on acupuncture and IVF show difference in improving live birth or pregnancy rates. The TCM literature is too vague to reach any positive conclusions."

Robert Norman AO FSM wrote to the Chair, CMBA, asking for them to comply with the legal requirements they facilitated by amending their examples to conform to the Board's own definition of acceptable evidence.

FSM also wrote to the Chair, CMBA about a member of his Chinese Medicine Accreditation Board Committee, who has published comments breaching CMBA's Position Statement. Articles published in the digital magazine 'Life Begins At' include claims that breach the new CMBA's position statement. We asked the Chair to direct his committee member to contact the magazine, to both remove the links and to print a retraction.

FSM also wrote to the Chair, CMBA, requesting the cancellation of accreditation of Bachelor of Health Science (Acupuncture) offered by Endeavour College of Natural Health. Apparently at some time this course was approved by the CMBA and is available in major cities across Australia.



Course notes were sent to relevant medical specialists for comment. Their scientific conclusions included "amazing rubbish", "I can't believe it!!", "I am horrified", "no scientific basis establishing its efficacy", "laughable", "utterly ridiculous stone-age theories", "completely fanciful", "beyond belief", "no scientific value whatsoever! Fanciful nonsense", "people will not be adequately diagnosed or treated" and "harmful, if only because it results in inappropriate treatment".





This course contradicts established facts about human physiology and pathology and relies for many of its 'diagnoses' and 'interventions' on non-existent, mysterious, indefinable, undetectable 'energy' that could never be validated by scientific investigations.

FSM alleged that the training offered by Endeavour College of Health, BHSc (Acupuncture) is of low quality, is based on pseudo-scientific concepts which reject germ theory as the cause of infections, teaches invalid diagnostic techniques, includes potentially dangerous interventions and could result in delays in patients being provided with a correct diagnosis and treatment. This course also wastes public funding allocated to Endeavour College.



### **UNIVERSITIES**

### **Murdoch University**



Concerned that Murdoch University was <u>teaching unproven</u> <u>veterinary interventions</u>. FSM sent a letter to the Chief Executive Officer, Veterinary Hospital, Murdoch University, urging him cease publishing pseudoscience on the Murdoch University website. We explained that this can only harm the excellent scientific reputation of his university.

We also urged him to have his students challenge the validity of using any Traditional Chinese Medicine approaches to animal care.

### **THERAPEUTIC GOODS ADMINISTRATION**

Homeopathic goods fall under the purview of the Therapeutic Goods Administration (TGA). Regulation is largely complaints-driven, so the TGA does little to actively regulate the industry because it views homeopathy as "very low risk". As such, homeopathic goods need not be registered or listed on the Australian Register of Therapeutic Goods unless they refer to the treatment of any form of a disease, disorder or condition. While homeopathy companies must comply with the Therapeutic Goods Advertising Code 2015, there are no effective penalties, such as fines, for Code breaches.

Following the submission by Dr Ken Harvey, Sasha Hall and Tiana Moutafis, BMedSci/Law Students, <u>supported by FSM</u>, a complaint was lodged by a supporter of unproven complementary medicine, with the Senate Community Affairs Legislation Committee. FSM <u>responded to that complaint</u>, emphasising the importance of continuing pre-vetting for advertisements, the maintenance of an independent complaints resolution panel (FSM has no confidence that internal TGA evaluations would be resourced or as independent as required), and asking that 'traditional use' as an explanation for effectiveness be accompanied by a clear statement that there is no scientific evidence to support such claims made for traditional use and indeed, for a number of products.



### A SPECIAL REPORT FROM PROFESSOR EDZARD ERNST

<u>Ethical issues in alternative medicine [we neglect them at our peril]</u> – a new book by Edzard Ernst and Kevin Smith:

In 2017, Medline listed just over 1,800 articles on 'complementary alternative medicine'. If you find this number impressively high, consider that, for 'surgery' (a subject often been branded as less that active in conducting research), there were almost 18,000 Medline-listed papers.

So, the research activity in CAM is relatively small. What I find much more regrettable, however, is the near total lack of investigations into the ethical issues in CAM. In 2017, there were just 11 articles on Medline on 'ethics and CAM' (24393 articles on 'ethics and surgery').

One of the 11 papers that tackled the ethics directly and that was (in **my** opinion) one of the best is this <u>article</u>. Here is its concluding paragraph:

"When we encounter patients who use or consider the use of complementary and/or alternative medicine, we should



Prof Edzard Ernst



Dr Kevin Smith

respect their autonomy while also fulfilling our obligations of beneficence and non-malfeasance. Physicians should become more knowledgeable about research on CAM therapies and approach discussions in an open, nonjudgmental manner to enhance patient trust. In situations where there is little risk of harm and the possibility of benefit, supporting a patient in their interest in complementary therapies can strengthen the patient-physician relationship. However, when a patient's desire to utilize alternative therapies poses a health risk, physicians have the ethical obligation to skilfully counsel the patient toward those therapies that are medically appropriate".

I have had a long-lasting and keen interest in the ethics of CAM which resulted in the <u>publication of many papers</u>.

For most of the time conducting this research, I felt that I was almost alone in realising the importance of this topic. And all this time, I was convinced that the subject needed more attention and recognition. Therefore, I teamed up with the excellent ethicist Kevin Smith from the University of Dundee, and together we spent the best part of 2017 writing about it.

Our book, now available, is entitled <u>"More Harm than Good? The Moral Maze of Complementary Medicine"</u>



It is an attempt to highlight some of the most important topics in this broad and under-researched area. While working on it, I was continually struck by the fact that most of the issues we have been struggling with on this blog are, in the final analysis, ethical by nature.

My hope is that, in 2018, we will see many more high quality papers filling the almost total void of ethical perspectives on CAM. In my view, it is unquestionably an area that needs to be addressed with some urgency.



### **RECENT RELEVANT PUBLICATIONS BY FRIENDS**

#### John Dwyer

- \* Australian patients vulnerable to quacks
- \* The parlous state of consumer protection from healthcare fraud
- The devastating effects of Trumpism on science and medicine

#### Ken Harvey

\* Call for closer Senate scrutiny on regulation/advertising of complementary medicines

#### 'The Bitter Pill' - Australasian Science

- \* Pallave Dasari Breast Cancer + Alternative Medicine = Lower Survival
- \* Loretta Marron Follow the money

#### **Edzard Ernst**

- Critical Thinking is good for you -please give it a try!
- \* Chiropractors and naturopaths should keep their hands off our kids, if you ask me
- Fighting for homeopathy on the NHS
- Chiropractic is not the best treatment for back pain !!
- Detox is bunk; save your money for something useful, fun or pleasant!

#### **Australian Skeptics**

\* 2017 Bent Spoon to NICM, Skeptic of the Year Christine Bayne

#### Forbes

 Steven Salzberg - <u>The Bogus Arguments That The Government Uses To Support Quack</u> Medicine

#### Science-based Medicine

- \* A Misguided Study to Test the Reliability of Traditional Chinese Medicine Pulse Diagnosis (Harriet Hall)
- \* <u>Infiltrative Pseudoscience</u> (Steven Novella)
- Vaccine Post Updates: the Good, the Bad, and the Crooked? (Clay Jones)
- Ten signs your detox may be a scam (Scott Gavura)
- \* The characteristics of antivaccine networks on Facebook (David Gorksi)
- \* <u>Damn the evidence and regulations: VA goes full speed ahead with medical pseudoscience</u> (Jann Bellamy)

#### Respectful Insolence (David Gorski)

Credulous promotion of "integrating" quackery into medicine

#### BioMed Central (Chiropractic & Manual Therapies)

\* Bob Strahinjevich & Keith Simpson - <u>The schism in chiropractic through the eyes of a 1st</u> year chiropractic student



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